

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

*See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.*

PLAINTIFF

Paul Julian Smith Sr.

COURT CASE NUMBER

1:07-CR-00477-GMS

DEFENDANT

(CMS) Regional Medical First Correctional

TYPE OF PROCESS

ORDER PROCESS

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN



DANIEL L. MCKENTRY Heckler & Flabizzio

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

800 DELAWARE AVENUE, SUITE 200 P.O. BOX 128 WILMINGTON DE 19899

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

PAUL J. SMITH SR.
1416 COUNCILSH CREEK ROAD
CAMDEN, DELAWARE 19934

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

3

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

302-543-4800

EMAIL: dmckenty@hfddel.com
SEAD ATTORNEY
ATTORNEY TO BE NOTICED

Signature of Attorney or other Originator requesting service on behalf of:

PLAINTIFF
 DEFENDANT

TELEPHONE NUMBER

302-499-1622

DATE

10-23-07

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 15	District to Serve No. 15	Signature of Authorized USMS Deputy or Clerk BT	Date 1-15-08
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
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Address (complete only if different than shown above)	Date of Service 1/17/08	Time pm	am
Signature of U.S. Marshal or Deputy BT			

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS:

As per

Per Daniel McKenty, he has never represented CMS. Refused service, return unexecuted